

PTO/SB/01 (10-05)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
With Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	WH-14
First Named Inventor	Mohammed Siddiqui Jaweed MUKARRAM
COMPLETE IF KNOWN	
Application Number	10/564,364
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A NOVEL PROCESS FOR THE MANUFACTURE OF (+)-(S)-CLOPIDOGREL BISULFATE FORM-I

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 08-04-2003 as United States Application Number or PCT International

Application Number PCT/IB2003/003104 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

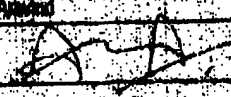
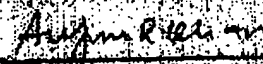
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page <u>3</u> of <u>3</u>	

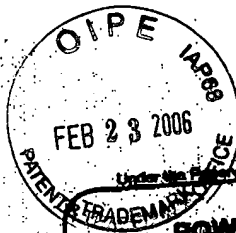
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Vasanta Arvind				MERWADE	
Inventor's Signature				Date <u>17-1-2006</u>	
Residence: City		State		Country	
Aurangabad		Maharashtra		India	
Home No. <u>54</u> , sector - <u>F</u> , N- <u>5</u> , CIDCO, Aurangabad - Pin - <u>431063</u> , Maharashtra, India.					
Mailing Address					
City		State		Country	
Aurangabad		Maharashtra		India	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Rajesh Arjun				KHAN	
Inventor's Signature				Date <u>17-1-2006</u>	
Residence: City		State		Country	
Aurangabad		Maharashtra		India	
Flat No. <u>9</u> , CRISTAL, Mohantal Nagar, opp: collector's office, Aurangabad (MS).					
Mailing Address					
City		State		Country	
Aurangabad		Maharashtra		India	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Inventor's Signature				Date	
Residence: City		State		Country	
Mailing Address					
City		State		Country	

The collection of information is required by 35 U.S.C. 118 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the burden of this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Approved for sale through FISHBASE, March 1980
U.S. Patent and Trademark Office U.S. Pat. No. 3,761,175

Application Number	10564364
Filing Date	
First Named Inventor	MAHMOUD SAHABY JAMES ZAKARIAN
Title	X-NOVEL PROCEEDS FOR THE
Art Unit	
Examiner Name	
Attorney Contact Number	204-12

I hereby revoke all previous powers of attorney given in the above identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Practitioner(s) named below:		Registration Number
Name		
Mr. Douglas Robinson		61-276
Dr. O. M. (Sam) Zaghmout		61-226

as my/her attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified applicant to:

☒ The address associated with the above-mentioned Customer Number

☒ The address associated with Customer Number.

OR	Firm or Individual Name	Bio Intellectual Property Services (Bio IPS) LLC
----	-------------------------	--

Address	8509 Kaman Ct
---------	---------------

City	London
------	--------

Country	USA
---------	-----

Telephone	703-550-1848
-----------	--------------


840 MA 203200

Enviado: 10/08/2010 10:00:00

I am the: ☐ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
☐ Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/60)

SIGNATURE of Applicant or Assignee of Record

Signature	
Name	Mohammed Zakari Jawad MUKARRAM
Firm and Company	

NOTE: Signatures of all the Investors or assignees of record of the entire interest or their representative(s) and required. Signature must be signed by more than one person and, see below.

☒ Total of 3 forms are submitted.

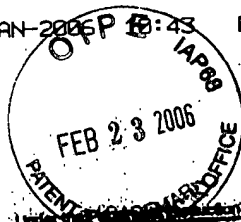
☒ Total of 3 forms are submitted.

The collection of information is required by 37 CFR 1.51, 1.52 and 1.92. The information is required by Patent Office forms or other documents filed with the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 322 and 37 CFR 1.51 and 1.92. This collection is exempt from public release. Any comments on the amount of the burden estimate or any aspect of the collection of information, including gathering of the estimates, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1430, Alexandria, VA 22304-1430. DO NOT SEND FREE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1430, Alexandria, VA 22304-1430.

SEND TO: Commissioner for Patents, P.O. Box 2000,

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number: 10/564,384

Filing Date: 10/564,384

First Named Inventor: Mohammed Elmaghrabi, MERSADAM

Title: A NOVEL PROCESS FOR THE

Art Unit: 2831

Examiner Name: WILK

Attorney Docket Number: WILK-14

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint: 58478

☒ Practitioners associated with the Customer Number: 58478

☒ Practitioner(s) named below:

Name	Registration Number
Mr. Douglas Robinson	61,278
Dr. O. M. (Sam) Zaghenout	61,288

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number: 58478

☒ The address associated with Customer Number: 58478

☒ Firm or Individual Name: Bio Intellectual Property Service (Bio IPS) LLC

Address: 9509 Kemron Ct

City: Lorton State: VA Zip: 22079

Country: USA

Telephone: 703-550-1988 Email: bioips@bioips.com

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(d) is enclosed. (Form PTO/SB/06)

SIGNATURE OF Applicant or Assignee of Record

Signature: [Signature] Date: [Date]

Name: Yelantiana Aravind MERWADE Telephone: [Telephone]

Title and Company: [Title and Company]

NOTE: Signature of all the inventors or assignees of record of the entire interest of their representative(s) must be obtained. Signatures must be in ink and the signature is required, see below.

☒ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain a patent in the United States and to file an application in the USPTO to prosecute an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.11 and 1.15. This collection is required to file an application to complete, including gathering, preparing, and submitting the completed application to the USPTO. Time and money are required to complete the application. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Small Business Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22304-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22304-1480.

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